

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			9/5
O.I.P.E. CLASSIFIER			10-4-01
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	H C	712	12-13-01

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 — (Through numeral) ... Canceled  
 ÷ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final	
Original	8/30/03
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27	✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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JCG  
13/04/01

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